

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

10/ 580,964

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		1 2					53						
4		2 1					54						
5		6 0					55						
6		6 1					56						
7		1 0					57						
8		0 1					58						
9		1 0					59						
10		0 1					60						
11		1 0					61						
12		0 1					62						
13		1 0					63						
14		0 1					64						
15		1 0					65						
16		0 1					66						
17		1 0					67						
18		0 1					68						
19		1 0					69						
20		0 1					70						
21		1 0					71						
22		0 1					72						
23		1 0					73						
24		0 1					74						
25		1 0					75						
26		0 1					76						
27		1 0					77						
28		0 1					78						
29							79						
30							80						
31							81						
32							82						
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35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	27	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	28						TOTAL CLAIMS						